11800001330

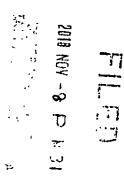
(Reques	tor's Name)	
(Address	5)	
(Address	5)	
(City/Sta	ite/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Busines	ss Entity Name)	
(Docum	ent Number)	
Certified Copies	Certificates of	Status
Special Instructions to Filing Officer:		

Office Use Only



100319230471

10/17/18--01012--002 **35.00



NOV 13 2018 T. LEMIEUX



COVER LETTER

TO: Amendment Section Division of Corporations

ON THE RISE COMMUNIT NAME OF CORPORATION:	
N18000009330 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for	filing.
Please return all correspondence concerning this matter to the f	ollowing:
Carlos Rosario	
(Name o	f Contact Person)
ON THE RISE COMMUNITY OUTREACH CORP.	
(Fin	m/ Company)
17504 SW 153 AVE	
	(Address)
Miami, Fl. 33187	
(City/ St	ate and Zip Code)
E-mail address: (to be used for futur	e annual report notification)
For further information concerning this matter, please call:	
Carlos Rosario	786 510-0356
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to	the Florida Department of State:
S35 Filing Fee S43.75 Filing Fee S43.75 Certificate of Status Cert	ed Copy Certificate of Status ional copy is Certified Copy



October 18, 2018

CARLOS ROSARIO 17504 SW 153 AVE MIAMI, FL 33187

SUBJECT: ON THE RISE COMMUNITY OUTREACH CORP.

Ref. Number: N18000009330

We have received your document for ON THE RISE COMMUNITY OUTREACH CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This is a Non-profit corporation the document you sent in is for a Profit corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 018A00021300

Articles of Amendment Articles of Incorporation of

ON THE RISE COMMUNITY OUTREACH CORP.

F	IL	F-	۳.,
	_	٠.	

(Name of Corporation as	currently filed with the Florid:	Dept. of State	NOV a		•
N18000009330			B	P	k g
	Number of Corporation (if know			- <u>-</u>	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For F	rofit Corporation add	opts the foll	r' owing	g i
A. If amending name, enter the new name of the cor	rporation:				
				e nev	
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated" (or the abbreviation "(Corp." or "	Inc."	
B. Enter new principal office address, if applicable:					-
Principal office address MUST BE A STREET ADD	<u>RESS</u>)				
					•
					-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	V)				
in the state of th					-
					-
		<u>-</u>			-
D. If amending the registered agent and/or registered		ter the name of the			
new registered agent and/or the new registered of	office address:				
Name of New Registered Agent:					-
					_
New Registered Office Address:	(Floria	la street address)			
		171 a ai da			
	(City)	, Florida _ (Zip Co	ode)		-
New Registered Agent's Signature, if changing Regi	Stored Agents				
I hereby accept the appointment as registered agent.		obligations of the po	sition.		
			<u> </u>		-
	Signature of New Registere	d Agent, if changing			

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sı	ones en	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	D	Carlos Rosario Sr.	14168 SW 139 Court
X Add			Miami, Fl. 33186
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
	

The date of each amendment(s) ado date this document was signed.	ption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block locument's effective date on the Department.	k does not meet the applicable statutory filing requirements, this date will artiment of State's records.	It not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)	ı
There are no members or member adopted by the board of director.	ers entitled to vote on the amendment(s). The amendment(s) was/were s.	
Dated 11/6/2018		
Signature	mb-fer	
have not beer	nan or vice chairman of the board, president or other officer-if directors is selected, by an incorporator – if in the hands of a receiver, trustee, or oppointed fiduciary by that fiduciary)	
Carlos Ro	sario	
	(Typed or printed name of person signing)	
COO		
	(Title of person signing)	